PTOSS/06 (12-04)
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U.S. Pecent and Tradement Office, U.S. DEPARTMENT OF COMMERCE

sperwork Reduction Act of 1895, no persons are required to respond to a collection of information unless it displays a valid OMB control number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN APPLICATION AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Cotumn 2) (Column 1) NUMBER FILED NUMBER EXTRA RATE (S) FEE (\$) RATE (\$) FEE (\$) FOR BASIC FEE (37 CFR 1.16(a), (b), or (c)) NA N/A NA SEARCH FEE NA N/A N/A N/A (37 CFR 1.16(k), (i), or (m)) **EXAMINATION FEE** N/A N/A N/A (37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS OR (37 CFR 1.16(1)) minus 20 • INDEPENDENT CLAIMS e Ezunim x = (37 CFR 1.16(h)) If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). N/A N/A MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.160)) TOTAL the difference in column 1 is less than zero, enter "0" in column 2. TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 3) (Column 1) (Column 2) HIGHEST CLAIMS PRESENT RATE (\$) ADOI-RATE (\$) ADDI-NUMBER REMAINING TIONAL PREVIOUSLY FXTRA TIONAL **AFTER** FEE (\$) FEE (\$) ENDMENT AMENDMENT PAID FOR Total (37 CFR 1.14(1)) 50 So OR Independent (SJ CFR 1.16(n)) Minus 200 _ = OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1)) N/A OR N/A TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) HIGHEST NUMBER CLAIMS RATE (\$) ADDI-ADDI-TIONAL PRESENT RATE (\$) REMAINING 8 TIONAL PREVIOUSLY EXTRA AFTER FEE (S) FEE (\$) NDMENT PAID FOR Minus Total OR Minus £ OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.180)) OR N/A N/A TOTAL TOTAL OR ADO'L FEE ADO'L FEE

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the Trighest Number Previously Paid For IN THIS SPACE is less than 20, enter 30.

If the Trighest Number Previously Paid For IN THIS SPACE is less than 3, enter 37.

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